

4th Fires Bde - Soldier Risk Assessment

(Will be completed/reviewed at least monthly; also required if significant changes occur)

Rank/Name of Soldier	Unit/Date	Rank/Name of Supervisor	
			BATTLE BUDDY
Question	Yes	No	Action
FINANCIAL PROBLEMS			
*1. Has the soldier had significant financial difficulties/had trouble paying bills or had a major change in financial situation?			Refer soldier first to unit command financial advisor or if necessary refer to Army Community Service, Financial Readiness Program.
2. Has the soldier had a "no-pay due" within the last 6 months?			Determine the reason and assess the impact; refer to unit command financial advisor; 1SG and Co Cdr ensure timely fix.
ALCOHOL AND OTHER DRUG RELATED ISSUES			
*3. Has the soldier been involved in an alcohol or drug related incident within the last 6 months?			Refer to Army Substance Abuse Program (ASAP) at time of incident. Closely monitor soldier's progress in the program.
4. Has the soldier ever tested positive on a urinalysis or has the soldier ever been enrolled in ASAP?			Monitor closely for any signs of recurrence.
5. Has the soldier ever used drugs or alcohol to deal with a life situation?			Refer to Army Substance Abuse Program for evaluation.
SUICIDAL THOUGHTS/GESTURES, OTHER STRESSORS/INDICATORS			
*6. Has the soldier experienced serious concern (agitation, withdrawal, grief) regarding combat/events while deployed or at other times?			Refer to unit chaplain (gatekeeper); assign a "battle buddy;" monitor behavior continuously.
7. Has the soldier been counseled through Community Mental Health Services in past 24 months?			Monitor closely.
8. Does the soldier appear to be a "loner"?			Assign battle buddy; monitor closely; refer to unit chaplain (gatekeeper).
9. Has the soldier had problems sleeping?			Refer to unit chaplain (gatekeeper).
*10. Has the soldier expressed excessive anger or seemed sullen and withdrawn within the past 12 months?			Refer to unit chaplain (gatekeeper).
*11. Has the soldier expressed any suicidal thoughts or actions?			Immediately refer to Community Mental Health. Do not leave the soldier alone. If soldier owns a firearm, order that it be stored in unit arms room.
DOMESTIC ISSUES			
*12. Has the soldier experienced a break-up in marriage/relationship in the past year or suffered the loss of significant other?			Refer to unit chaplain (gatekeeper).
13. Has the soldier been involved in any incidents of domestic violence within the last 24 months?			Review domestic violence policies with soldier. If convicted of an offense, must be assigned to TDA position where there is no access to firearms.
*14. Has the spouse or other family member expressed concern about the soldier's return home or behavior?			Refer to unit chaplain (gatekeeper).
15. Does the soldier have an exceptional family member?			Determine circumstances and impact on soldier and the family. Assess how well the soldier is coping and refer to unit chaplain if necessary.
MEDICAL ISSUES			
16. Has soldier/family member been involved in a serious accident, suffered a wound in combat, or become seriously ill in the last 12 months?			Assess how well soldier is coping and refer to unit chaplain (gatekeeper) if soldier shows any signs of difficulties in coping.
17. Is the soldier taking any medications that may affect behavior/mood or ability to drive?			Stress the importance of following the health care provider's instructions and the importance of reading and adhering to medication warnings/instructions; pay particular attention to warnings about mixing with alcohol.

*** Yes answer in this section automatically increases the "Safety Risk" to HIGH and mandates review by Platoon Leader, 1SG and Company CDR to determine appropriate risk mitigation plan**

Question	Yes	No	Action
ACCIDENTS/POV/POW/HIGH RISK ACTIVITIES			
18. Is the soldier planning on leaving the Fort Hood area while on leave or pass?			Determine where/how long? Will soldier be driving alone? Require soldier to submit travel and rest plans if traveling over 150 miles; do not permit soldiers to depart on an extended drive after a full workday.
*19. Does the soldier own a boat / motorcycle/ATV/ MOPED/motorized scooter?			Ensure soldier has completed mandatory training and adheres to Ft Hood policy. Order soldier not to drive the motorcycle (except during approved training) until properly licensed.
*20. Does the soldier intend to purchase a motorcycle etc?			Order soldier not to drive the motorcycle on or off post until mandatory training is completed. Schedule the soldier for training.
21. Has the soldier received a traffic citation or been involved in any type of accident in the past year?			Discuss nature of accident and contributing factors. Counsel soldier on the importance of following procedures/developing good habits.
22. Has the soldier exhibited any reckless behavior or taken shortcuts (not following instructions or procedures) that could lead to an accident?			Determine the nature and extent of any reckless behavior. Counsel soldier on the importance of following procedures/developing good habits.
23. Does the soldier own a Privately Owned Weapon (POW)?			Ensure POW is registered. Counsel soldier on the importance of proper firearm storage. Consolidate unit lists and submit to BDE. BDE will send list to Rear Detachment for assistance in registration procedures.
24. Does the soldier ever fail to use a seatbelt or other personal protective equipment?			Counsel soldier in writing on seatbelt use/use of personal protective equipment.
25. Does the soldier own a Privately Owned Vehicle (POV)?			Determine if the soldier's POV is registered on Fort Hood. Are insurance, license and unit inspection current? Take corrective action as required. All soldiers will be given a POV Inspection by the unit prior to going on the 4 day pass (even those stored in the POV storage lot).

DUTY PERFORMANCE/CAREER/LEGAL

26. Has the soldier been AWOL in the last year?			Educate soldier on opportunities in the Army, reenlistment incentives, and benefits of honorable discharges.
27. Has the soldier been denied promotion or reenlistment for any reason?			Counsel soldier on performance and develop action plan IAW with established goals.
28. Is the soldier's GT score below 90?			Enroll in BSEP/counsel on impact on Re-up and tuition assistance.
29. Has the soldier been counseled for poor performance, or had an act of indiscipline in the past year?			Closely monitor soldier's duty performance.
30. Has the soldier failed to meet any military requirement/standard (e.g. PT, weight control, weapons qualification etc)?			Develop and implement a plan of action to meet the requirement/standard. Closely monitor the soldier's progress. Determine how well soldier is coping and refer to unit chaplain (gatekeeper) if required.
31. Has the soldier had any serious encounters with the chain of command or other officials in the past year?			Determine the nature of the incident and determine if there are any patterns.
32. Has soldier or a family member been involved with law enforcement during the past 12 months?			Determine nature of the involvement and disposition of the case. If the case involved allegations of domestic abuse, refer to unit chaplain for triage and to determine if referral to Social Work Services is appropriate.

*** Yes answer in this section automatically increases the "Safety Risk" to HIGH and mandates review by Platoon Leader, 1SG and Battery/Company CDR to determine appropriate risk mitigation plan**

Well-Being Rating

Safety Risk	#YES Answers	Review Level
LOW	0 to 2	Squad Leader/Section Chief
MODERATE	3 to 4	Platoon Sergeant or Platoon Leader
HIGH	5 to 7	Battery Commander to Battalion Cdr
EXTREMELY HIGH	8 OR Higher	Battalion Cdr info to Brigade Cdr

ALL SOLDIERS WILL INITIALLY BE COUNSELED AND ASSESSED BY THEIR FIRST LINE SUPERVISOR

A score of 8 or higher, the Battalion Commander must immediately notify the Brigade Commander

The Batter/Company Cdr still maintains primary responsibility for High Risk/Extremely High Risk cases to the hospital. Hospital will call the Cdr/alternate.

Soldier's Signature

Date of Assessment

Section Chief's Signature

Platoon Leader or Platoon Sergeant Remarks/Recommendations:

Soldier's Signature

Plt Sgt/Ldr Signature & Date

1SG//Cdr Signature & Date